FORM V. S.
No. 11.
50M-2-14-08.

MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

PLACE OF BIRTH

County of Lacka

Township of Fell

or

Borough of

or

City of

No. ....., ... St.

..... Ward.

COMMONWEALTH OF PENNSYLVANIA

Bureau of Vital Statistics

CERTIFICATE OF BIRTH

Registration District No. 598

Primary Registration District No. 2829

File No.

Registered No. 346

FULL NAME OF CHILD Daisy Russell

Sex of Child Female | Twin, Triplet, or other? Single | and Number in order of birth 2d | Legitimate? yes | Date of birth July (Month) 13 (Day), 1908 (Year)

FATHER	MOTHER
FULL NAME William Russell	FULL MAIDEN NAME Bessie Jones
RESIDENCE Fell Township	RESIDENCE Fell Township
COLOR White	AGE AT LAST BIRTHDAY 38 (Years)
COLOR White	AGE AT LAST BIRTHDAY 22 (Years)
BIRTHPLACE Pa	BIRTHPLACE Wales
OCCUPATION Milkman	OCCUPATION Housekeeper

Number of child of this mother Two

Number of children, of this mother, now living One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, and that it occurred on July 13, 1908, at ..... M.

*When there was no attending physician or midwife, then the father, mother, householder, etc., should make this return.

(Signature) Jno. S. Niles M.D.

(Physician or Midwife)

Address Carbondale, Pa

Given name added from a supplemental report

....., 190

Registrar

Filed Aug. 8, 1908 Fred W. Lewis

Registrar

not our William Russell, but the 5th child of John & Jeanette (Cameron) Russell — see p. 1803

(7) h 9181

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